

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE 2014 MAR 28 AH II: 15

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

SECTION OF STATE OF S

Please type or print legibly. Instructions are included on back of application.

2.	business is: LIFE'S DOORS HOME HEALTH AND HOSPICE The true name(s) and business address(e.g., address).	es) of the entity or individual(s) doing
	business under the assumed business nar Name	me: <u>Complete Address</u>
	Teton Healthcare, Inc. 2 199290	27101 Puerta Real, Suite 450
	CTHAIC	Mission Viejo, CA 92691
3.		on and Public Utilities
	Finance, Insurance, and Real Estate	Assumed Business Name and \$25.00 fee to:
4.	The name and address to which future correspondence should be addressed: Susan Graaff	Secretary of State 450 North 4th Street PO Box 83720
	27101 Puerta Real, Suite 450	Boise ID 83720-0080 208 334-2301
	Mission Viejo, CA 92691	
5.	Name and address for this acknowledgme copy is (if other than # 4 above):	
Siana	ture: So	Secretary of State use only
_	ed Name: Soon Burnam	
	city/Title: Treasurer	
•	ture:	IDAHO SECRETARY OF STATE
Printed Name:		03/28/2014 BH: 1417587 CK: 916696 CT: 284718 BH: 1417587
	city/Title:	1 8 25.00 = 20.0

n.pmd | Rev 07/2010

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